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## BIB DATA SHEET

CONFIRMATION NO. 1853

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/584,362	06/23/2006	510	1645	VB60639	
<b>APPLICANTS</b> Martine Petronella Bos, Utrecht, NETHERLANDS; Jan Poolman, Rixensart, BELGIUM; Boris Tefsen, Utrecht, NETHERLANDS; Johannes Petrus Maria Tommassen, Utrecht, NETHERLANDS;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/14770 12/21/2004					
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0329827.0 12/23/2003 UNITED KINGDOM 0416398.6 07/22/2004					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 11/01/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/BRIAN J GANGLE/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Indicate	<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWINGS</b> 16	<b>TOTAL CLAIMS</b> 58	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B482 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398 UNITED STATES					
<b>TITLE</b> Vaccine					
<b>FILING FEE RECEIVED</b> 3210	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		